

TANF FAQs

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Many Nevadans have trouble making ends meet each month because they are unemployed, unable to work, lose or start employment, are new to the area, do not receive child support, have no medical coverage or suffer other losses which create financial or medical hardships. But it doesn't have to be that way. Each month, thousands of families across the state turn to the Division of Welfare and Supportive Services for help in the form of TANF, TANF-Related Medicaid or other Medical assistance, jobs/job readiness training, child support enforcement and other services which lead to self-sufficiency. Read on to learn how to receive help if you qualify.

Frequently Asked Questions

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TANF Questions and Answers

- What is the Temporary Assistance for Needy Families (TANF) Program? [^ ^](#) (Return to Questions)

The TANF Program is a federally funded block grant from the Department of Health and Human Services (DHHS). It is designed to provide temporary assistance for needy families to care for dependent children in their own homes or in the homes of relative caretakers. TANF furnishes financial, medical and support services such as child care, transportation and other services for families that are unemployed, underemployed or unable to work. Federal law allows a five-year lifetime limit for receipt of TANF benefits.

- Will I get Medical coverage with TANF or can I apply for Medical Assistance only? [^ ^](#) (Return to Questions)

All individuals eligible and approved for TANF cash assistance are automatically eligible for medical coverage. Persons who meet TANF requirements may opt to receive TANF-Related Medicaid (TRM) assistance only or apply for medical coverage through other Medicaid programs such as the Children's Health Assurance Program (CHAP) which is available to minor children and pregnant women ([click here to see Medicaid Programs](#)).

The state also offers the Nevada Check Up Program to children who do not qualify for CHAP.

- Where do I apply for TANF, TANF-Related Medicaid or other Medical Programs? [^ ^](#) (Return to Questions)

You can go to your local welfare office ([Click here to find the office nearest you](#)) to pick up or file an application; OR you may request an application be mailed to you. The application may be mailed, dropped off or faxed to your local welfare office and is used to apply for any and all programs listed on the form. If you reside on a Nevada Indian Reservation or Colony you may also check with the Tribal Social Service Office or Health Clinics for application information.

For an application form that you can print out from your computer and fill out at home, follow the links below for the applications.

Application Forms

Application-Related Forms Available on-line

Application Form (2905-EG)

Application Information Sheet (2522-EE)

Informacion Necesaria Para Rocesar Su Solicitud (2522-EES)

Change Reporting Form - SNAP, TANF, Medicaid (2584-EG)

- How do I apply if I am in a domestic violence center for abused persons and will my whereabouts be kept confidential?
(Return to Questions)

Your application can be filed from the abuse center who often acts as your authorized representative. Federal and state regulations prohibit the disclosure of information pertaining to you and your child(ren). All information is confidential and your location will not be released. However, you must still meet financial and non financial requirements (e.g., income and resource limits, residency). Cooperation with the Child Support Enforcement Program (CSEP) and related court appearances will be waived.

- Are there time limits for receiving TANF and/or Medical assistance? (Return to Questions)

There are two time limits for individuals receiving TANF assistance where any adult household member is also receiving assistance. If the adult member is not receiving TANF assistance, the time limits do not apply:

- State limit:

24 months of TANF cash assistance from Nevada, whether cumulative or consecutive. After receiving benefits for 24 months, the household is ineligible for TANF cash assistance for 12 consecutive months, unless suffering from a qualifying hardship. The household may remain eligible for Medical assistance during this time period provided all eligibility requirements are met. This continues alternating between 24 months receiving cash and 12 months not receiving until the household has received 60 months of TANF cash assistance from Nevada or any other state, either cumulatively or consecutively.

- Federal limit:

60 months of cash assistance, from all states combined either cumulatively or consecutively, after which assistance ends for a lifetime, unless hardship criteria are met.

- Medical Assistance limit:

There is no time limit for receiving Medical assistance as long as program requirements are met.

- Will I get SNAP benefits if I am approved for TANF or Medical Assistance? (Return to Questions)

If you applied for SNAP benefits with your TANF or medical assistance application you may be approved for SNAP benefits before the TANF or medical application is approved or at the same time. However, if you did not apply for SNAP at the time of the TANF or medical application, you may do so at any time.

- Do I have to be a United States citizen to get help? [^ ^](#) (Return to Questions)

You must be a U.S. citizen or Lawful Permanent Resident (LPR). An LPR is eligible if they have paid Social Security taxes for at least 40 quarters (10 years), or eligible in another non-citizen category. TANF, TANF-Related Medicaid and other Medical Assistance may be available to "qualified aliens" who arrived in the country before August 22, 1996. For non citizens who arrived on or after August 22, 1996, the state complies with federal laws which may limit or expand eligibility to various groups. Contact your local welfare office for information about "qualified alien" categories and requirements. Non-citizen parents may apply for benefits for their children who are U.S. citizens. Receiving TANF or Medicaid won't affect your ability to become a U.S. citizen.

- What if my spouse or the parent of my child(ren) is in the home? Can I still receive assistance? [^ ^](#) (Return to Questions)

You may apply for and receive TANF or TANF-Related Medicaid as a two parent household if all financial and non-financial program requirements are met. The two parent TANF cash assistance is counted in the state and federal time limits. If one or both parents are incapacitated and it is determined a "qualified hardship", the TANF cash assistance payments may not count toward the time limits.. Some parents are receiving Supplemental Security Income (SSI) and are only eligible for Medicaid. Their children may receive TANF cash assistance which does not count toward the time limits.

- What type of assistance might I receive if I don't have a family or am pregnant and have no other children? [^ ^](#) (Return to Questions)

To qualify for TANF cash assistance you must have a dependent child or be in your sixth month of pregnancy; there is no TANF cash assistance program for adults without children. Pregnant women may be eligible for Medicaid at any stage of the pregnancy.

- Do I have to work, look for work or participate in a job training program to receive TANF? [^ ^](#) (Return to Questions)

When applying for TANF cash assistance, unless exempt, adult household members are required to participate in Applicant Job Search (AJS) ([click here for more information](#)). Support services to allow participation in the AJS, such as child care, transportation and special needs for employment, are available.

When TANF cash assistance is approved, you must participate in the New Employees of Nevada (NEON) program ([click here for more information](#)). This program provides training and education to assist a recipient in obtaining employment and becoming self-sufficient. NEON also provides support services including child care, transportation and payments for special needs items necessary for employment. If both parents are in the home, one parent must participate in NEON unless child care is being paid, in which case both parents must participate.

The following adult household members are not required to participate in NEON if they are:

- caretaker relatives (not the parent), 60 years of age or older, receiving TANF cash assistance for themselves; OR

- the head of the household caring for an ill or incapacitated member of their household.

The following adult household members are exempt from participation in NEON if they are:

- the parent of a newborn child. You may request and use one life-time exemption as a single adult parent caring for a child under age 12 months; OR
- a single custodial parent with a child under 6 years of age and prove appropriate child care is unavailable, unsuitable or unaffordable; OR
- the minor parent of a newborn. You are exempt until the child reaches 12 weeks of age.

Persons applying for or only receiving TANF-Related Medicaid or other medical assistance are not subject to NEON requirements.

- What is an Assessment and Personal Responsibility Plan? [Return to Questions](#)

An Assessment (click here pages 16-21) pre-screening form is completed for TANF cash households at initial application and updated as needed, while the household receives assistance. The purpose of the assessment is to identify existing job skills, prior work experience and determine the employability of each adult household member. The need for job training, transportation, and child care services is also evaluated. Adult household members are screened for barriers (including domestic violence) to attaining self-sufficiency and each child is screened to ensure immunization records are current and school attendance is assessed.

A Personal Responsibility Plan (PRP) (click here pages 16-21) is a contract between the Division of Welfare and Supportive Services and each TANF cash household and is based on the Assessment. The plan outlines specific steps to be taken by the TANF participant to achieve economic independence. It also identifies the role of each member of the household, their obligation to the plan and the steps the Division of Welfare and Supportive Services will take to support each TANF participant's efforts. Support services may be provided to help achieve both short and long-term goals. The plan is reviewed every six (6) months by the TANF participant and the eligibility and employment workers, and if involved, at least every three (3) months by the participant and the social worker. The plan may or may not be updated when circumstances change.

- Do I have to cooperate with the Child Support Enforcement Program (CSEP) to get TANF and medical assistance? [Return to Questions](#)

The responsible relative caretaker who is applying for or receiving TANF cash assistance must cooperate with the CSEP requirements by:

- providing information on the non custodial parent (NCP);
- participating in efforts to locate the NCP (absent parent);
- establishing paternity when necessary;
- establishing a child support order; and
- remitting all support payments to the state after TANF assistance is approved.

Failure to cooperate, without good cause, results in denial of a TANF application or termination of a TANF cash grant.. The family may also choose to receive TANF- Related Medicaid (TRM) rather than cash assistance. If the responsible adult is a pregnant woman, she will continue to receive pregnancy related Medicaid coverage during her pregnancy.

The caretaker relative has the right to claim "good cause", and request a determination of its validity, for not cooperating with CSEP.

- What if I have assets, such as a car, can I still get help? [^ ^](#) (Return to Questions)

The value of one vehicle is not counted, no matter what it is worth. Your other assets if they are counted may total up to \$2,000. The value of other vehicles applied to the resource total is determined by subtracting from the Fair Market Value of the vehicles, any amount owed.

The following are examples of some assets that don't count: one home and surrounding property, burial plot, personal possessions such as clothes, jewelry, furnishings, household goods or pets, resources or income of an SSI recipient. There are other assets which may not count and can be discussed with the caseworker. However, these are some of the items counted as assets: checking and savings accounts, Individual Retirement Accounts (IRAs), certificates of deposit, stocks and bonds. Recreational vehicles and property other than that listed above. The Attorney General's Office rules on whether or not a trust fund is counted, if you have one.

- What's the most help I can expect? [^ ^](#) (Return to Questions)

The maximum TANF cash assistance (click here to see payment table) you can receive each month depends on how many people in your household are eligible and the countable income available after allowable program deductions and penalties or repayments. The remainder is deducted from the maximum payment for your household size. SSI income is not counted when determining the payment amount. Subsidized housing, like Section 8, is assigned a value not to exceed \$76 and is also deducted from the maximum payment for your household size.

- Are there any deductions allowed from my income? [^ ^ ^](#) (Return to Questions)

Each eligible wage earner does not have their earnings counted for three months, followed by nine (9) months of only counting 50% of their earnings. Out of pocket costs for the care of a child or incapacitated adult who are eligible members of the household are also allowed if necessary for employment. If you are self-employed, all verified business-related expenses can be allowed. Children's earned income will not be counted for 6 to 12 months each year if certain requirements are met.

- What should I bring with me when I apply? [^ ^](#) (Return to Questions)

You need proof of the information provided, so it's very helpful to bring as many of the following items as you can:

- A Nevada driver's license or other identification (ID).
 - A social security card or proof you have applied for one.
 - Proof of birth for all persons applying for assistance.
 - Marriage and/or divorce decree.
 - Proof of school attendance for school age children.
 - Proof of income received, such as pay stubs or a statement from your employer, Social Security Administration, child support payments, loans, etc.
 - Latest bank statements and proof of other assets such as vehicles, property.
 - Proof of residency (lease agreement, rent receipt, mortgage, utility bills).
 - Verification of household composition (who lives in the home and relationship).
 - Verification of subsidized housing assistance.
- What happens once I get to the Division of Welfare and Supportive Services office? Â Â (Return to Questions)

If you do not have an appointment, one will be scheduled when your application is filed at the Division of Welfare and Supportive Services office. If you already have an appointment you will meet with a caseworker who may be able to tell you if you will qualify for assistance and what type is available. Your caseworker may need to request more information and give you a specific amount of time to return it. If you have trouble obtaining the information your caseworker will assist you.

It is sometimes difficult to know what the exact payment amount will be or if eligibility requirements are met because all verification needed is not always available at the interview. Your caseworker will review the application with and you may ask additional questions or clarify your answers. Requirements for each program will be explained in addition to your rights and responsibilities, what changes to report and when. Some interviews may take place at another location if necessary.

- What if I cannot keep or miss my appointment? Â Â (Return to Questions)

If you are unable to keep an appointment due to an emergency, other barriers or need to reschedule your appointment, contact the Division of Welfare and Supportive Services office immediately. The appointment can be rescheduled with good cause.

- How long will it take to get cash or medical assistance approved? Â Â (Return to Questions)

An eligibility decision may take as long as 40 to 45 days depending upon information needed. However, a decision must be made no later than the 45 th day from application unless there are extenuating circumstances.

- When is my payment effective? Â Â (Return to Questions)

Your TANF cash assistance payment amount is determined based on the date the application is approved or from the 30th day from the date of application, whichever is sooner. Your medical coverage is effective the first day of the month of application, if eligible.

- When can I expect my check or Medicaid Card? Â Â (Return to Questions)

If you are approved you could receive payment and your Medicaid card in the week you are approved, but will normally receive these the following week. Once approved, the check is mailed at the end of each month. The Medicaid card you receive is permanent and you will not receive a new card each month.

- What if I am facing eviction, homeless or have no money or a place to stay? Â Â (Return to Questions)

The Division of Welfare and Supportive Services is staffed with individuals able to provide you with information about local community resources. They may refer you to a specific shelter, a local food pantry or other support services.

- What if I move to another state or location within the state, is my application or case transferred? Â Â (Return to Questions)

If you move out of state, your application will be denied or your assistance terminated because assistance is not transferred from state to state. However, if you move to another location within the state, your application will be transferred to the local welfare office servicing your new location.

- Do I have the right to appeal a decision or action on my case? Â Â (Return to Questions)

You have the right to file an appeal on any decision or action taken on your case. The legal notice of decision which explains the action taken, contains language and instructions for filing an appeal.

- Do I have to repay overpaid benefits? Â Â (Return to Questions)

In most situations, you will be required to repay the Division of Welfare and Supportive Services any overpaid benefits.